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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006		Docket Number (Optional) 102790-135/APN
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		
Application Number 10/538,038	Filed June 8, 2005	
For G-Proteins		
Art Unit 1633	Examiner Long, Scott	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate fee are as follows (check time period desired and enter the appropriate fee):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.26.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1263</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038		
I am the <input type="checkbox"/> applicant/inventor		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>25,900</u>		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>/Serie Ian Mosoff/ Signature</u>		<u>June 16, 2007</u> Date
<u>SERIE IAN MOSOFF Typed or printed name</u>		<u>(212) 808-0700</u> Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 1 form is submitted.

This collection of information is required by 37 CFR 1.136(a). This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

NORRIS McLAUGHLIN & MARCUS
DEPOSIT ACCOUNT NO. 14-1263

COMMISSIONER FOR PATENTS & TRADEMARKS
ALEXANDRIA, VA 22313-1450

CHARGE AUTHORIZATION DATE:		
REQUESTED BY:		
CLIENT # / MATTER #:		
CLIENT NAME:		
APPLICATION SERIAL #:		
AMOUNT CHARGED		
ACCOUNTING CODES	EXPLANATION OF CHARGE	AMOUNT
<input checked="" type="checkbox"/> 00035 <input type="checkbox"/> 00037 <input type="checkbox"/> 00038 <input type="checkbox"/> 00040 <input type="checkbox"/> 00042 <input type="checkbox"/> 00043 <input type="checkbox"/> 00044 <input type="checkbox"/> 00045 <input type="checkbox"/> 00048 <input type="checkbox"/> 00049 <input type="checkbox"/> 00050 <input type="checkbox"/> 00051 <input type="checkbox"/> 00053 <input type="checkbox"/> 00054 <input type="checkbox"/> 00055 <input type="checkbox"/> 00060 <input type="checkbox"/> 00063 <input type="checkbox"/> 00064 <input type="checkbox"/> 00065 <input type="checkbox"/> 00066 <input type="checkbox"/> 00067	<input checked="" type="checkbox"/> Patent Extension of Time <input type="checkbox"/> Issue Fee <input type="checkbox"/> Search Fee <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Late Filing Declaration Fee <input type="checkbox"/> Notice of Appeal Filing Fee <input type="checkbox"/> Assignment Recordation <input type="checkbox"/> Oral Hearing Request Fee <input type="checkbox"/> Fee for Certified Copies <input type="checkbox"/> Patent Application Filing Fee <input type="checkbox"/> Examination Fee <input type="checkbox"/> Extra Claim Surcharge <input type="checkbox"/> Official Filing Fee <input type="checkbox"/> Multiple Dependent Claim Surcharge <input type="checkbox"/> Certified Priority Document <input type="checkbox"/> Petition Fee <input type="checkbox"/> Publication Fee <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> PCT Application <input type="checkbox"/> Oath & Declaration <input type="checkbox"/> Request for Continued Examination	

Date	
Client No./Matter No.	
Client Name	
Attorney	
Secretary	

EXPENSES

EXPENSE	HRS./#	RATE	TOTAL CHARGE
Steno		\$35.00/hr	0.00
Copies		\$0.35/copy	0.00
Telephone (\$7.00 for long distance calls)			
Telefax \$11.00 – 1-10 pages \$22.00 – 10-20 pages \$33.00 – 20 or more			
Regular Postage \$2.00 – 1-5 pages \$0.50 for each additional 5 pages			
Express Mail (*\$20.00 if flat rate envelope is used. If package bulky or heavy please check with Taso or Yves for actual cost)			
DHL			
Miscellaneous:			